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FORM (Rev. 67/03)  DR-3  NOTICE OF  DISSOLUTION		
For Office Comm. #_ Indexed	Use Only 826	
Audited Computer Certified D	ate of Dissolution	

Mail to:

## **Notice of Dissolution**

ann Yairhild for Lowa State House District Official Name of Committee
31/24 Dogwood Ave,
Street
Fertili Jours 50434
City, State, Zip Code
(641) 797-221 (Nome)  Area Telephone  Code  (C41) 757-2383 (Cell)

IECDB 510 East 12<sup>th</sup>, Suite 1A Des Moines, Iowa 50319

## WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

- 1. All debts, loans and obligations have been paid or transferred;
- 2. All campaign funds have been spent;
- 3. All campaign property sold or transferred (candidates only); and
- 4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

Signature of Candidate or Treasurer (if candidate's committee)/Signature of Chair or Treasurer (if PAC)

Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.